

Dual Enrollment Authorization Form

This form must be submitted prior to the college's course registration deadline for dual enrollment students each semester. Submit to the Early College Office via email at earlycollege@triton.edu or in person in the A Building, Room A-125, during office hours.

Students s	hould con	nplete the	following steps	prior to the	submission of	f this form:			
			inrollment Applica es, you have alrea	•	•	time. If you hav	e previously to	aken any dual	
some sci	ence cour	ses) by up	mit an alternate p loading evidence ic Advising Depa	with your a	pplication.			, English, and	
Part A: S	tudent lı	nformati	on						
Name	l act			First			M.I.		
	Last			11130			IVIII		
Home AddressStreet				City	,	State	ZIP		
Date of Birth Student Ph			Student Phone Nu	Phone Number High			School		
Student Em This should	nail Addres I be an em	ss ail addres	s you check regul	larly.					
Part B: C	ourse Re	egistrati	on Information	n					
Semester of Registratio		tion	□ Fall	☐ Spring	☐ Sum	nmer	Year		
Course Se	lection								
Dept.	Course	Section	Course Title		Credit Hours	Days	Times	Location	
ECC Example	110 Only	004							

Part C: Dual Enrollment Terms and Conditions

- I understand I am enrolling in a college-level course that will require rigorous academic work and maturity.
- I understand I am responsible for communicating to my parents/guardians all Dual Enrollment Program correspondence sent to my Triton student email provided by Triton College.
- I understand that I must fulfill all dual enrollment admission requirements during the established registration periods. Registrations will not be accepted beyond the established registration period.
- I understand that in order to withdraw from the college course without penalty, I must officially withdraw at the Welcome Desk or the Office of Early College Programs of my intent prior to the college's established deadline or risk receiving a "W" or "F" on my college transcript.

- I understand the grades earned through the Dual Enrollment Program are a part of my permanent college record. College grades earned while in high school affect college GPA. (For example, if a student earns a final grade of "C", the student will have a college GPA of 2.0. There may be future financial aid or scholarship implications to the student's GPA and eligibility.)
- I understand that it is my responsibility to request my official Triton College transcript through the college's Records Department to transfer any college credits earned through the Dual Enrollment Program.
- I understand by participating in the Dual Enrollment Program, I am included in the college's Family Educational Rights and Privacy Act (FERPA) policy. Under the FERPA policy, students have a right to expect information in their education records will be kept confidential and will be disclosed only with their permission or under provisions of the law, with the exception of the college's obligation to share my education records with the high school I am enrolled in. Education records (including course grades and payment information) will not be provided to parents without the student's consent.

Parents of students under the age of 18 retain their rights under FERPA at your high school, and may inspect and review your educational records sent by the college to your high school. Furthermore, for high school students under the age of 18 and who are listed as legal dependents of their parents for tax purposes under the IRS rules, the college retains the right to disclose personally identifiable information from your educational records to your parents. The FERPA Release Form must be fully completed, signed and submitted to the Records Office in the Student Center, Room B-220, by the student.

Student Name (Print/Signature)	Date				
Guardian/Parent Name (Print/Signature)	Date				
Part D: High School Personnel					
The student is responsible for payment of:	The high school will sponsor payment of:				
☐ Tuition and Fees	☐ Tuition and Fees				
☐ Textbooks	☐ Textbooks				
☐ Course Materials (Specify):	☐ Course Materials (Specify):				
□ None	□ None				
High School Administrator or Counselor Signature	Date				
High School Administrator or Counselor (Print Name)	Phone Number				
Email					
To be completed	by Early College Office.				
Colleague ID	Initials				
Date Received	Initials				
Date Registered	Initials				
Date Email Registration Confirmation	Initials				
Date Email or Welcome Letter	Initials				